Merchant Standing Order Payment Report

Number OF Transactions: 4
Beneficiary Name: STAROYLA DAMIANOY
Beneficiary IBAN: CY09005003680003681087560101
Payment Mode: Bank Transfer
Commission Value: 10.00
Reference Number: SO - 355974
Date/Time: 2021/12/09 03:05
Beneficiary Bank Name: HELLENIC BANK PUBLIC COMPANY LTD

Date	Branch	Time	TranID	Order ID	Merchant User Type	Merchant User	Amount	Fee	Net Amount
2021/12/08	25 March 44	07:33	6178892	976827	SuperAdmin	Admin	2.00	0.01	1.99
		09:48	6180622	357883	SuperAdmin	Admin	6.50	0.05	6.45
		11:39	6182563	694644	SuperAdmin	Admin	4.00	0.03	3.97
		12:00	6182865	334934	SuperAdmin	Admin	2.00	0.01	1.99
		Total/Branch					14.50	0.10	14.40
	Total/Date						14.50	0.10	14.40
Total							14.50	0.10	14.40

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